



Request for Refund of Louisiana Citizens Property Insurance Corporation Assessment

INDIVIDUAL INCOME TAX

**FILING PERIOD
2006**

→ Your first name	Initial	Last name	Suffix	→ <input type="text"/>	Your Social Security Number
→ If joint return, spouse's name	Initial	Last name	Suffix	→ <input type="text"/>	Spouse's Social Security Number
→ Present home address (number and street including apartment number or rural route)					
→ City, town, or APO		State	ZIP		

Before You Begin

The Louisiana Legislature enacted R.S. 47:6025 which allows a refundable tax credit to reimburse you **if you paid, prior to January 1, 2007**, an assessment to fund the Louisiana Citizens Property Insurance Program as a part of your homeowner's insurance premium. You may use this form to claim this refund if you are not required to file a Louisiana income tax return for 2006.

Below list the name of your insurance company and the policy number, and the amount of the assessment paid. If you have more than one property that has been assessed, please complete Form R-INS Supplement and attach it to this return. For Line 1 below, enter the total amount of your assessment for your first property. For Line 2 below, enter the sum of remaining assessments for all other properties you own that incurred an assessment.

**You must attach a copy or copies of your Insurance Declaration Page to this return.
Please see instructions on the other side of this form.**

1 Address of
Property 1 _____
Insurance Company _____
Policy Number _____

Amount of Assessment → .

2 Total amount of additional assessment(s) paid on other properties you own.
Attach Form R-INS Supplement. → .

REFUND

3 Add the assessment amounts on Lines 1 and 2. Print the result here. → .

I declare that I have examined this return, and to the best of my knowledge, it is true and complete. Declaration of paid preparer is based on all available information. I also consent that the Louisiana Department of Revenue may contact my insurance company/companies to verify the amount of the Louisiana Citizens Property Insurance Corporation assessment paid, and I further direct my insurance company/companies to provide the Citizens Insurance Assessment information to the Louisiana Department of Revenue upon request.

Your signature	Date	Signature of paid preparer other than taxpayer	
Spouse's signature (If filing jointly, both must sign.)	Date	Telephone number of paid preparer ()	Date

Area code and daytime
telephone number

MAIL TO:
Louisiana Department of Revenue
P. O. Box 3576
Baton Rouge, LA 70821-3576

6765





**Instructions for Preparing Your 2006
Louisiana Request for Refund of Louisiana
Citizens Property Insurance Corporation
Assessment (R-540INS)**

ABOUT THIS FORM

The return has been designed for electronic scanning, which permits faster processing with fewer errors. In order to avoid unnecessary delays caused by manual processing, taxpayers should follow the guidelines listed below:

1. You may file this form to claim your refund of the Louisiana Citizens Property Insurance Corporation assessment(s) that you paid during calendar year 2006 only if you are not required to file a Louisiana income tax return. You may also use the form to claim your refund if you did not claim the credit on your Louisiana income tax return instead of filing an amended return.
2. Print amounts only on those lines that are applicable.
3. Use only a pen with black ink.
4. Because this form is read by a machine, please print your numbers inside the boxes like this:

1	2	3	4	.	00
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5. All numbers should be rounded to the nearest dollar.
6. Numbers should NOT be printed over the pre-printed zeros, in the boxes on the far right, which are used to designate-cents (.00).
7. To avoid any delay in processing, you can only use this form for 2006.
8. Failure to attach the Insurance Declaration Page(s) will result in this form being returned to you.

Name(s), address, and Social Security Number(s) – Print your name(s), address, and Social Security Number(s) in the space provided. If married, please print Social Security Numbers for both you and your spouse.

Information concerning the assessment amounts and Insurance Declaration Page – The amount of this assessment may appear as separate line items on what is referred to as the “**Declaration Page**” of your property insurance premium notice. The Declaration Page names the policyholder, describes the property or liability to be insured, type of coverage, and policy limits. Depending on the location of the insured property, these line item charges may be listed as: Louisiana Citizens FAIR Plan **REGULAR** Assessment, Louisiana Citizens FAIR Plan **EMERGENCY** Assessment, Louisiana Citizens Coastal Plan **REGULAR** Assessment, and/or Louisiana Citizens Coastal Plan **EMERGENCY** Assessment. Your total allowable credit is the sum of these amounts, if they are shown on the Declaration Page.

Line 1– Print the address of the property, the insurance company’s name, and the policy number in the spaces provided. Print the amount of the paid assessment in the appropriate boxes.

Line 2 – Do you own more than one property that incurred an assessment?

If you had more than one property during 2006 that incurred an assessment, prepare and attach Form R-INS Supplement. You must attach the Declaration Page for each property listed. Print on Line 2 the total of the additional assessments list-ed on the Form R-INS Supplement.

Sign and date the return. Mail to: Louisiana Department of Revenue
P. O. Box 3576
Baton Rouge, LA 70821-3576.

